

ABSTRAK

Penelitian ini bertujuan menyusun model pemberdayaan hamba Tuhan dalam mendukung individu berisiko HIV dan AIDS untuk melakukan VCT. Penelitian dilaksanakan di Kota Kupang pada bulan Agustus 2015 sampai Maret 2016.

Metode Penelitian tahap 1 menggunakan rancangan *cross sectional*, besar sampel 78 dengan teknik *random sampling*. Teknik analisis yang digunakan adalah model persamaan struktural. Penelitian tahap 2 adalah eksperimen semu dengan 17 kelompok intervensi (pelatihan) dan 17 kelompok kontrol yang diambil secara random dari 78 responden pada penelitian tahap 1. Teknik analisis data yang digunakan dengan uji *paired t test* dan *independent t test*. Penelitian tahap 3 adalah jenis penelitian *observational analitik* dengan rancangan *cross sectional*, besar sampel 51 orang. Teknik analisis data yang digunakan adalah regresi linear dan logistik.

Hasil tahap 1: *health literacy* ($\gamma=0,54$; $p<0,001$), kepemimpinan melayani ($\gamma=0,26$; $p<0,001$) dan *trust* ($\gamma=0,29$; $p<0,001$) berpengaruh secara langsung terhadap keberdayaan hamba Tuhan, modal sosial tidak berpengaruh secara signifikan terhadap keberdayaan hamba Tuhan. Hasil tahap 2: Pelatihan meningkatkan rata-rata pengetahuan sebesar 69,57% ($p<0,001$), keterampilan mengidentifikasi individu berisiko HIV sebesar 239,2% ($p<0,001$) dan dukungan VCT 170,8% ($p<0,001$). Hasil tahap 3: dukungan VCT dari hamba Tuhan berpengaruh positif terhadap sikap ($b=0,59$; $p<0,001$), norma subjektif ($b=0,49$; $p<0,001$) dan keyakinan ($b=0,61$; $p<0,001$) individu berisiko HIV dan AIDS untuk melakukan VCT. Dukungan masyarakat tidak berpengaruh secara signifikan terhadap sikap, keyakinan dan norma subjektif demikian juga dengan dukungan keluarga, namun berpengaruh secara signifikan terhadap keyakinan. Sikap ($b= 0,34$; $p=0,006$) dan norma subjektif ($b= 0,36$; $p= 0,008$) berpengaruh positif terhadap niat namun keyakinan tidak berpengaruh secara signifikan. Niat berpengaruh positif terhadap perilaku individu berisiko HIV dan AIDS untuk melakukan VCT ($b=0,42$; $p=0,004$).

Penelitian ini menyimpulkan bahwa hamba Tuhan dapat diberdayakan untuk memberikan dukungan pada individu berisiko HIV dan AIDS untuk melakukan VCT. Hamba Tuhan perlu diberikan pelatihan untuk meningkatkan *health literacy*-nya.

Kata kunci: Pemberdayaan, Hamba Tuhan, HIV dan AIDS.

ABSTRACT

The aim of this study was to compile a model of empowerment of God's servant to support individuals at risk of HIV and AIDS to take VCT. The research is conducted on August 2015–March 2016 in Kupang City. Research method in phase 1 was observational with cross sectional in which the sample was 78 God's servants, selected through random sampling technique. The technique of analysis used was the structural equation model. Phase 2 of the study was quasi experiment with 17 respondents of intervention (training) group and 17 respondents of control group who were randomly selected from 78 respondents in phase 1. The technique of data analysis used was paired t test and independent t test. Phase 3 of the study was analytical observational research with cross sectional design in which the samples were 52 God's servants. The technique of data analysis used was linear and logistic regressions.

The results of the phase 1: health literacy ($\gamma=0.54$; $p<0.001$), leadership in serving ($\gamma=0.26$; $p<0.001$) and trust ($\gamma=0.29$; $p=0.001$) directly affected the empowerment of God's servants while social capital did not significantly affect the empowerment of God's servants. The results of the phase 2: The training increases knowledge 69,57% ($p<0.001$), skills in identifying individuals at risk of HIV 239,2% ($p<0.001$) and support to take on VCT 170,8% ($p<0.001$). The result of phase 3: God's servants' support to take VCT positive affected on the attitude ($b=0.59$; $p<0.001$), subjective norm ($b = 0.49$; $p<0.001$) and conviction ($b=0.61$; $p<0.001$) of individuals at risk of HIV and AIDS to take VCT. Community support did not significantly affect attitude, conviction, subjective norm as well as family support, but significantly affected conviction. Attitude ($b=0.34$; $p = 0.006$) and subjective norm ($b=0.36$; $p=0.008$) positive affected on the intention, but did not significantly affected conviction. Intention positive affected on the individuals at risk of HIV and AIDS to take VCT ($b=0.42$; $p=0.004$).

This research concludes that God's servants can be empowered to give support to individuals at risk of HIV and AIDS to take VCT. God's servants' health literacy should be improved through the training in order to improve God's servants' empowerment in response to HIV and AIDS.

Keywords: Empowerment, God's servant, HIV and AIDS.